

CONTROLLED MEDICATIONS DESKTOP INSTRUCTION

Background:

Some medications are specially controlled and tracked by the Drug Enforcement Agency (DEA) because of their potential for abuse (primarily narcotics). They are categorized C-II, C-III and C-IV based upon their level of risk. These medications must be purchased by a DEA-licensed individual (i.e. a physician), and tracked cradle-to-grave such that the DEA license of the purchaser is responsible to ensure they are properly accounted for all the way through use or controlled destruction. Consequently they have special handling requirements and signatures for hand-off. We have special arrangements for sending these through Customs (New Zealand or Chile) to get the medications to Antarctica, which must be stringently followed in order to avoid confiscation by Customs, and potentially losing our ability to continue to supply the stations' pharmacies.

1. Orders must be placed utilizing a valid DEA license number (see Medical Director).
2. Schedule II medications (narcotics with high potential for abuse) must be ordered on a DEA Form 222.
3. Controlled meds MUST be received in Denver, not shipped to Port Hueneme.
 - a) Form 222 for schedule II medications must be signed and provided to the vendor (i.e. McKesson). Keep a copy for our files!
 - b) Follow-up any backordered medications and research any packing list discrepancies immediately.
 - c) Until sent to the Station, keep in secure area (Medical safe). Per DEA regulations, double-lock is required, i.e. in the safe, in a locked room. Exception for refrigerated narcotics.

Continental (McMurdo or Pole) Shipments from the U.S.:

1. Controlled medications MUST go through the USAP logistics system to avoid Customs problems. Send via FedEx to Port Hueneme, similar to other medication shipments:
 - a) List items by lot number and expiration date for an inventory/packing list (spreadsheet/etc.)
 - b) Keep a copy on file, send an e-copy to the receiving Ice clinic, and send an e-mail alert to Port Hueneme (PTH)-Cargo to alert them of special control for arriving package.
 - c) Box up the meds securely, with one copy of the inventory list inside the box, and one inventory list on the outside packing list pouch with the ORGEAR/Cargo form.
 - d) Mark the box on two sides and the top with the Project number, Station, ROS date and "COMAIR", and recipient (Clinic Physician). Boldly note: "MEDICATION – DO NOT FREEZE" but

do not identify with any special marking that the package has controlled meds which would be visible while en route.

- e) FedEx to PTH overnight.
- f) Submit ARB justification for COMAIR, if needed.
- g) Track by TCN#, if possible, to ensure timely delivery.
- h) Obtain confirmation of receipt (i.e. e-mail) from the Station Physician when it arrives on Ice. Keep a copy of the e-receipt with the inventory/packing list.

Local Purchase in New Zealand:

To avoid the lengthy order/ship process, some controlled medications may be purchased from Dodds Pharmacy in Christchurch (the only local source that the NZ Ministry of Health has authorized us to use for prescription medications. Arrangements managed by the RPS-NZ office).

1. The Medical Director may coordinate directly with Dodds to finalize items and ensure they are available in New Zealand, but still has to complete the proper Purchase Requisition paperwork, which is faxed to Christchurch Procurement to complete the sale/payment.
2. E-mail the list of items to purchase to RPS-NZ in Christchurch for them to complete a local purchase. The e-mail must give the charge code, Station, and ROS date, as well as the list of items and quantities.
3. Dodds (Peter Cooke, Pharmacist) will confirm by e-mail, and then deliver the meds to the Flight Line for shipment.
4. The Clinic Physician must sign for the shipment and then e-mail the Medical Director to verify receipt BY LOT NUMBER AND QUANTITY.
5. Controlled Meds in the McMurdo or Pole pharmacies are maintained on special narcotics logs for control of inventory, usage (prescription), and hand-off (in addition to the pharmacy database entry). See form ME-LMNPS-311a. Medications are maintained in the clinic safe, under double-lock as identified above.
6. After expiration, foreign-purchased medications must NOT be shipped back to the U.S. for destruction. Contact Dodds Pharmacy for shipment back to them, or approval for local destruction.
7. If destroyed locally, a certificate must be made and signed by the Station Physician, Waste Management, plus a witness (preferably the Station Manager) certifying destruction BY LOT NUMBER AND QUANTITY.

Peninsula (Palmer Station, N.B. Palmer, L.M. Gould) Shipments from the U.S.:

The ONLY authorized method to ship controlled medications through Chile is via PHYSICIAN HANDCARRY. They cannot be sent through Logistics or the mail system. All shipments must be cleared through Customs first. Plan at least a month in advance to ensure the paperwork goes through.

As with the Continental side, Peninsula-bound controlled medications MUST be ordered and received in Denver. DO NOT send Peninsula-bound shipments to PTH.

1. As a Physician deployment approaches, review the need for controlled medications for Palmer/Vessels, since this will be the only opportunity until the next Physician turnover.
2. Alert Peninsula Logistics (Rebecca Shoop) a month in advance of the type/quantity of controlled drugs expected to be ordered/shipped. You don't have to wait for the exact items to be received; this can be adjusted (within reason). Keep Physician updated on status.
3. Peninsula Logistics will generate a letter to the U.S. Embassy in Santiago, copied to AGUNSA, requesting approval to hand-carry the meds. The letter must identify the Physician's DEA license number and planned flight schedule. The U.S. Embassy coordinates with Chile Customs for approval.
4. When meds are received at DHQ, validate/update the list and create an "official" spreadsheet listing the meds enclosed by lot number, courier, and Denver contact info. One copy of the list is placed in the box; one is carried by the Physician. E-mail a copy to Palmer and Peninsula Logistics who will update AGUNSA.
5. Have Physician sign over medications by lot number and retain a copy.
6. Physician carries through Customs – AGUNSA will assist in Santiago.
7. Upon arrival in Punta Arenas, the Physician should hand over all meds to the Marine Project Coordinator (MPC) on the vessel to place in the safe. Obtain hand-off signatures.
8. Upon arrival in Palmer, sign-over again, to Physician and Clinic safe inventory. E-mail verification of receipt at final designation is maintained in the Denver files.

Local Purchase in Chile:

The ONLY method to get controlled medications to Palmer between Physician turnovers is to purchase locally in Punta Arenas. Note that this should be avoided if possible, because of the lack of control if we don't have our own people verifying receipt and maintaining signatures and hand-offs. Also, some narcotics are not available in Chile (i.e. Oxycodone).

1. AGUNSA is the agent that does all our local purchasing in Chile. All contact with AGUNSA should be through Peninsula Logistics, rather than direct. Frequently cc-ALL in e-messages to confirm correct item/packaging/etc.
2. Send e-mail requesting items to Peninsula Logistics (Rebecca Shoop), to include the WBS to charge against. Peninsula Logistics will forward to AGUNSA.
3. AGUNSA verifies availability, item, packaging, price, and e-mails back for confirmation. Provide confirmation for them to purchase said items and quantities.
4. AGUNSA purchases and gives items to the MPC of the next vessel southbound. Copies of hand-off signatures should be faxed to DHQ Medical.

5. When received at Station, Physician receives, signs off, and sends a copy to Denver for record BY LOT NUMBER AND QUANTITY. If vessel hand-off has not been sent to Denver, Station Physician does so upon receipt.
6. Destruction of expired Chilean medications should be done LOCALLY. Do not ship back to U.S. for DEA destruction, nor to Chile. Coordinate with Waste Management for destruction method and witness sign-off.
 - a. Destroy by dissolving tablets or pouring liquid meds into paint thinner or other solvent. Dispose as hazardous solvent.
 - b. Maintain destruction certificate with Physician/Waste Management/witness signatures on Station, copy provided to DHQ Medical.

Destruction and disposal:

The DEA has approved the local destruction (in Antarctica) of controlled medications purchased in the U.S. Formerly, these required by-pill accounting and tracking all the way back to the U.S. for destruction in a DEA-certified facility. Local destruction is a huge savings in cost and effort, so please follow carefully to ensure we do not lose this privilege.

1. Station Physician identifies the medications proposed for destruction on a DEA Form 41 and faxes to the DHQ Medical Director. Note that ALL controlled medications are maintained in the emergency cache of each Station for a year or two past expiration, so these will be very old medications.
2. Medical Director sends Form 41 to the DEA, along with a cover letter identifying the Station Physician's DEA number, the date proposed for destruction, method of destruction (i.e. dissolve in solvent), and witness names that will sign off concurrence of destruction. Give several weeks for approval before the proposed date.
3. Send to: [REDACTED] (Special Agent In Charge) or [REDACTED] Diversion Group Supervisor
U.S. Dept of Justice, Drug Enforcement Admin.
Denver Field Division
115 Inverness Drive East
Englewood CO 80112 [REDACTED]
[REDACTED]
4. The DEA will review (request additional info if needed) and fax back the approval.
5. Scan and send the approval and Form 41 to the Station.
6. Station Physician destroys the medications per appropriate method and date approved, obtains witness signatures, and scan/send back to the DHQ Medical Director.
7. DHQ Medical Director faxes the final signed copy to the DEA for record, and maintains a copy on file.
8. Dissolved medications are disposed of as hazardous waste in accordance with procedures for the solvent used.